

Reaching The Unreachable and Least Prepared Populations

**APHA 135th Annual Meeting & Expo
November 6, 2007**

The Grand Hyatt, Washington, DC

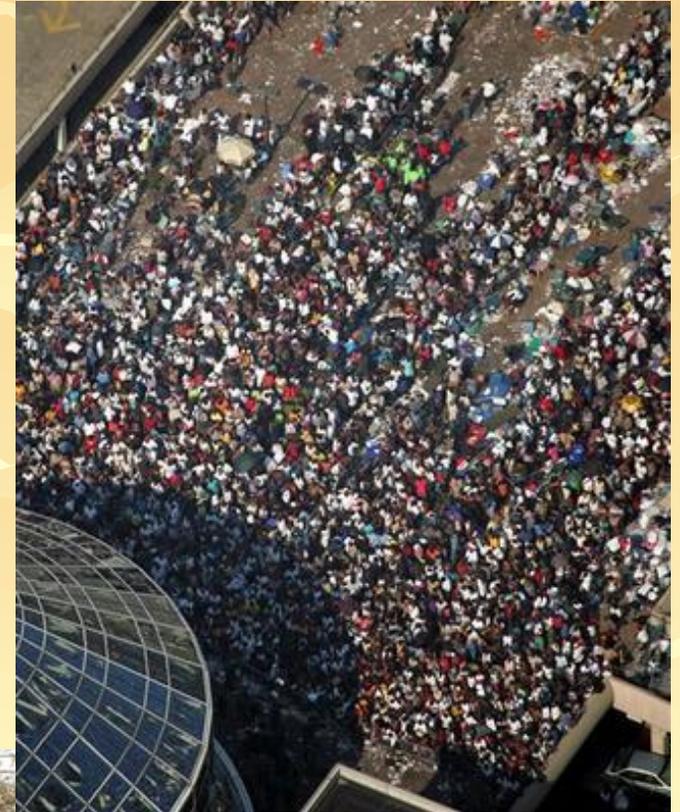
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Discussion Topics

- **Current Activities**
- **Recommendations for the Future**

2005 Hurricanes Aftermath



Drexel University, SPH

- **Center for Health Equality**
- **DHHS, Office of Minority Health, funding**
- **To provide guidance and assistance to public and private organizations**
- **To integrate racially and ethnically (R/E) diverse communities into emergency event planning and delivery**

Gold & Andrulis, 2006

Drexel University, SPH

■ Before an Emergency:

- Minorities are more likely to be under-prepared (Pastor et al., 2006)
- They are less likely to receive disaster educational opportunities (Faupel et al., 1992)
- They are less likely to be involved in preparedness activities (Fothergill et al., 1999)

Gold & Andrulis, 2006

Drexel University, SPH

■ During an Emergency:

■ **Warning Communication:**

- **Minorities are less exposed to disaster warnings and evacuation information, and often rely on informal sources (Fothergill et al., 1999)**
- **Minorities are more likely to encounter cultural and language barriers (Pastor et al., 2006)**

■ **Physical Impact:**

- **Minorities experience disproportionately higher morbidity, mortality and injury (Fothergill et al.,)**

Gold & Andrulis, 2006

Drexel University, SPH

- **After an Emergency:**
 - **Minorities recover more slowly because they are more likely to:**
 - **Experience cultural barriers**
 - **Receive inaccurate or incomplete information due to language barriers**
 - **Experience other bureaucratic barriers**

Gold & Andrulis, 2006

Drexel University, SPH

Current Initiatives

- **Abundant resources and initiatives on preparedness**
- **Many acknowledge the need to address preparedness for R/E communities**
- **Some provide translated materials**
- **There are some promising models**

- **Areas of concentration at the state and local level:**
 - **Resource Guides**
 - **Training and Education**
 - **Policies and Programs**
 - **Measurement**

Gold & Andrulis, 2006

Drexel University, SPH

Actions for the Future

- Risk communication strategies need to overcome culture and language barriers.
- Knowledge and skills related to culturally diverse communities should be integrated into public health training content
- Coordinate federal, state and local level resources, roles and responsibilities that incorporate priorities for diverse communities.
- Develop evidence-based measurement and evaluation.
- Include diversity in national and state preparedness policies and program priorities.

Gold & Andrulis, 2006

Philadelphia County Medical Society

PCMS Block Captains Health Care Advisory Council

- **Program began in 1998-1999**
- **Collaboration between PCMS & Public Health**
- **Approximately 6000 Block Captains**
- **Provides training on many health issues**
- **Incorporating training on preparedness**

City of Philadelphia Neighborhoods



Philadelphia County Medical Society

Dinner Meeting on Preparedness

- **Partners - PCMS, PDPH, DHHS-Region III**

- **Information to be shared**
 - **Emergencies and threats**
 - **Response planning**
 - **Block Captain Role**
 - **Ready or Not (www.readyphiladelphia.gov)**
 - **Other Resources**

Defining At Risk Individuals

- Uniform definition of “at-risk” individuals that will be consistent with other terminology, such as “special needs,” or “vulnerable” populations.
- Incorporated into the draft National Response Framework and is also being used for implementation of the Pandemic & All Hazards Preparedness Act
- HHS and a wide range of representatives at all levels on government and the public and private sector reached clarity on the principles and assumptions of this functional definition.
- The definition uses a function-based approach that focuses on individual capabilities rather than on labels or broad generalizations about populations.
- HHS approach allows a common definition to be used for “at-risk,” “special needs” and “vulnerable” populations.

Pandemic & All Hazards Preparedness Act

“Special needs” refers to those who may have additional needs before, during, or after an incident in one or more of the following functional areas: maintaining independence, communication, transportation, supervision, and medical care. Individuals in need of additional response assistance may include those:

- Who have disabilities.
- Who live in institutionalize settings.
- Who are elderly.
- Who are from diverse cultures.
- Who have limited English proficiency or who are non-English speaking.
- Who are children.
- Who are transportation disadvantaged.

Transition

Reaching
The Unreachable and
Least Prepared Populations

Who else is Unprepared (Unreached)?

- By a show of hands:
 - How many people here have this or better type of emergency radios in the hotel room (or car)?
 - How many have stocked up on specific female or male necessities, as the case may be, for emergency situations?
 - How many of us called home, since arriving here at APHA, to remind family and/or loved ones of our prior personal and family emergency plans?

Who else is Unprepared?

- Can and should we expand unreached
 - To include the conscientious, caring public health workers in this room/elsewhere, who are ready for community response, but have forgotten their own needs?
- Supervisors & colleagues have a role to play –
 - Remind first responders & public health workers
 - Also, airplane pre-take off instructions require that in an emergency, first, we put on the oxygen mask, before assisting children and others!

In Rural Pennsylvania

- Farmlands and other rural communities
- Many in our rural colleges are first generation enrollees
- How can we reach these populations?

In Rural Pennsylvania

- Through shared daily human activities?
 - Cooperative extension units
 - Beauty salons
 - Barber shops
 - Diners and Restaurants
 - Sororities and fraternities on campuses

In Rural Pennsylvania

- Through the faith community
- Through service organizations
 - Rotary club and others
 - They know one another and can help
- Other relevant avenues in each locale

Incorporate Actions Into Other Health Initiatives

- A recommendation to avoid vertical programs
- Integrate health initiatives in community
- Contact trusted opinion leaders in rural areas
 - Our Mayor, Health Officer and Health Board
 - Have been involved pandemic flu preparedness

Thank You, and You, and You!



■ Finally, we would like to thank you



- For all your efforts on behalf of the Unreachable
- If you previously felt unappreciated,
- Know that we care and thank individuals/agencies



- Black Caucus, Disability Forum
- Public-Private Partnerships and many more



- In addition, thanks for this APHA presentation opportunity



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